



ASC Utilization Report  
State Form 49933 (R3/6-05)  
Indiana State Department of Health  
Acute Care

Status: Finalized

I. Center Identification

Organization Name: ADVANCED SURGERY CENTER, LLC

Street Address: 1400 Teal Road, Suite 7

City: Lafayette

County: IN

Administrator Name: Robert Williamson

Administrator Email: asc@williamsoneyeinstitute.com

ASC Web Address:

Fiscal Year: 2019

Accredited:  Yes  No

Name of Accrediting Body: AAAHC

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	3

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	3047	3047
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1607	
66821	850	
65855	124	
66982	124	
66761	44	
67228	43	
67210	42	

67036	27
65756	25
65426	19

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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